

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Starner Jones for Congress

ADDRESS (number and street)

PO Box 297

Check if different
than previously
reported. (ACC)

Pontotoc

MS

38863

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00574269

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

MS

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2015

through

M M / D D / Y Y Y Y

03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Kilgore

Signature of Treasurer

Paul Kilgore

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Starner Jones for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	27751.00	27751.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	27751.00	27751.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	84413.14	84413.14
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	84413.14	84413.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	143337.86	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	200000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 20

Write or Type Committee Name

Starner Jones for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

12500.00

12500.00

(ii) Unitemized.....

201.00

201.00

(iii) TOTAL of contributions from individuals ▶

12701.00

12701.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

15050.00

15050.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

27751.00

27751.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

200000.00

200000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

200000.00

200000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

227751.00

227751.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 20

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	84413.14	84413.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	84413.14	84413.14

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	227751.00
25. SUBTOTAL (add Line 23 and Line 24).....	227751.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	84413.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	143337.86

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

Patrick Bufkin

A.

Mailing Address 106 Granberry Way

City

Madison

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-General

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 21 2015

Transaction ID : SA11AI.4224

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

John Chang

B.

Mailing Address 1 Castle Dr

City

Wilmington

State

MA

Zip Code

01887

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-General

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 18 2015

Transaction ID : SA11AI.4128

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Ken Clowers

C.

Mailing Address 5255 Hwy 9 N

City

Pontotoc

State

MS

Zip Code

38863

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Pharmacy

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-General

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 30 2015

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

A. Roger Criner

Mailing Address 10207 Shrewsbury Run West

City

Collierville

State

TN

Zip Code

38017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2015



Primary



General



Other (specify)

Special-General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11AI.4222

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Joel R Epperson Jr

Mailing Address 4208 Jada Cove

City

Jonesboro

State

AR

Zip Code

72404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2015



Primary



General



Other (specify)

Special-General

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2015

Transaction ID : SA11AI.4175

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

C. John Fleenor

Mailing Address 3078 Brntwood Run Dr

City

Collierville

State

TN

Zip Code

38017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2015



Primary



General



Other (specify)

Special-General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2015

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

Brent Harrison

Mailing Address 108 Cove Ln

City

Madison

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-General

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2015

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

Mary Harrison

Mailing Address 108 Cove Ln

City

Madison

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-General

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2015

Transaction ID : SA11AI.4177

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

Carl Wayne Mahon

Mailing Address PO Box 41

City

Pontotoc

State

MS

Zip Code

38863

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Businessman

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2015

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

William Regan

A.

Mailing Address 5898 Brierhedge Avenue

City

Memphis

State

TN

Zip Code

38120

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Special-General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Sandra Rich

B.

Mailing Address 8401 J R Manor Dr #100

City

Tampa

State

FL

Zip Code

33634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Epperson & Rich

Occupation

Attorney

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Special-General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2015

Transaction ID : SA11AI.4226

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Jeremy Wade

C.

Mailing Address 136 Walter Lott Rd

City

Seminary

State

MS

Zip Code

39479

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2015

☐ Primary☐ General☒ Other (specify)

Special-General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

12500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 20

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

Starner Jones

Mailing Address 136 North Brooks Street

City

Pontotoc

State

MS

Zip Code

38863

FEC ID number of contributing
federal political committee.

C H6MS01198

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-General

Election Cycle-to-Date

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 03 / 2015

03

2015

Transaction ID : SA11D.4187

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Starner Jones

Mailing Address 136 North Brooks Street

City

Pontotoc

State

MS

Zip Code

38863

FEC ID number of contributing
federal political committee.

C H6MS01198

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-General

Election Cycle-to-Date

10050.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 15 / 2015

15

2015

Transaction ID : SA11D.4191

Amount of Each Receipt this Period

10000.00

In-kind - Signature Gathering

Full Name (Last, First, Middle Initial)

Starner Jones

Mailing Address 136 North Brooks Street

City

Pontotoc

State

MS

Zip Code

38863

FEC ID number of contributing
federal political committee.

C H6MS01198

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-General

Election Cycle-to-Date

13300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 18 / 2015

18

2015

Transaction ID : SA11D.4100

Amount of Each Receipt this Period

3250.00

In-kind - Staff Salary

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

13300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 20

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15
12 13a 13b 14

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NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

Starner Jones

Mailing Address 136 North Brooks Street

City

Pontotoc

State

MS

Zip Code

38863

FEC ID number of contributing
federal political committee.

C H6MS01198

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-General

Election Cycle-to-Date

15050.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11D.4102

Amount of Each Receipt this Period

1750.00

In-kind - Staff Salary

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

15050.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 20

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

Starner Jones

Mailing Address 136 North Brooks Street

City

Pontotoc

State

MS

Zip Code

38863

FEC ID number of contributing federal political committee.

C H6MS01198

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2015

☐

Primary

☐

General

☒

Other (specify)

Special-General

Election Cycle-to-Date

215050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA13A.4179

Amount of Each Receipt this Period

200000.00

Personal Funds

Full Name (Last, First, Middle Initial)

B.
Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.
Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

200000.00

TOTAL This Period (last page this line number only).....

200000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

A. 3dt, LLC

Mailing Address 198 Hand Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2015

City	State	Zip Code
Flowood	MS	39232

Amount of Each Disbursement this Period

675.00

Purpose of Disbursement
PrintingCategory/
Type**Transaction ID : SB17.4147**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Addison Hall Design

Mailing Address 506 Grant's Ferry Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2015

City	State	Zip Code
Brandon	MS	39047

Amount of Each Disbursement this Period

1554.84

Purpose of Disbursement
Graphic DesignCategory/
Type**Transaction ID : SB17.4149**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Austin Chambers

Mailing Address 818 6th Street NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

City	State	Zip Code
Washington	DC	20002

Amount of Each Disbursement this Period

6000.00

Purpose of Disbursement
Strategy ConsultingCategory/
Type**Transaction ID : SB17.4108**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8229.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Starnier Jones for Congress

Full Name (Last, First, Middle Initial)

A. Austin Chambers

Mailing Address 818 6th Street NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
See Below

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

749.16

Transaction ID : SB17.4110

B. Austin Chambers

Mailing Address 818 6th Street NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Reimbursement for Mileage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

463.65

Transaction ID : SB17.4110.0

[MEMO ITEM]

c. Ryan Bonifay

Mailing Address 4464 Timberfield Circle

City	State	Zip Code
Pfafftown	NC	27040

Purpose of Disbursement
Field Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.4111

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3749.16

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

A. Costco

Mailing Address 2431 N Germantown Pkwy

City	State	Zip Code
Memphis	TN	38018

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2015

Amount of Each Disbursement this Period

757.89

Transaction ID : SB17.4153

B. Crye-Leike

Mailing Address 8 S 3rd St #101

City	State	Zip Code
Memphis	TN	38103

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2015

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.4208

c. Starner Jones

Mailing Address 136 North Brooks Street

City	State	Zip Code
Pontotoc	MS	38863

Purpose of Disbursement
In-kind - Signature Gathering

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) Special-General

State: MS

District: 01

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2015

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.4192

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

13757.89

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

A. Starner Jones

Mailing Address 136 North Brooks Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2015

City	State	Zip Code
Pontotoc	MS	38863

Amount of Each Disbursement this Period

3250.00

Purpose of Disbursement
In-kind - Staff SalaryCategory/
Type**Transaction ID : SB17.4101**

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) Special-General

State: MS District: 01

Full Name (Last, First, Middle Initial)

B. Starner Jones

Mailing Address 136 North Brooks Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2015

City	State	Zip Code
Pontotoc	MS	38863

Amount of Each Disbursement this Period

1750.00

Purpose of Disbursement
In-kind - Staff SalaryCategory/
Type**Transaction ID : SB17.4103**

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) Special-General

State: MS District: 01

Full Name (Last, First, Middle Initial)

C. Michael Allen Photography

Mailing Address 8795 Becca Point

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		27		2015

City	State	Zip Code
Cordova	TN	38016

Amount of Each Disbursement this Period

1100.00

Purpose of Disbursement
Event PhotographyCategory/
Type**Transaction ID : SB17.4104**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6100.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Starnier Jones for Congress

Full Name (Last, First, Middle Initial)

A. Veronica Minier

Mailing Address 157 Deer Park Drive

City	State	Zip Code
Thaxton	MS	38871

Purpose of Disbursement
Finance Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 16 / 2015

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4142

B. Ross Purgason

Mailing Address 4925 Emory Griffin Rd

City	State	Zip Code
Gillsville	GA	30543

Purpose of Disbursement
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 30 / 2015

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.4115

c. Cody Randall

Mailing Address 900 Steeplechase Rd

City	State	Zip Code
Alpharetta	GA	30004

Purpose of Disbursement
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 30 / 2015

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.4113

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

6500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Starnier Jones for Congress

Full Name (Last, First, Middle Initial)

A. Right Path Strategic Affairs

Mailing Address 3960 Rolling Hills Dr

City	State	Zip Code
Cumming	GA	30041

Purpose of Disbursement
Strategy Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4106

B. Southern Research Group

Mailing Address 4780 N Hwy 55 #400

City	State	Zip Code
Jackson	MS	39211

Purpose of Disbursement
Signature Collection

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2015

Amount of Each Disbursement this Period

8100.00

Transaction ID : SB17.4140

c. Southern Research Group

Mailing Address 4780 N Hwy 55 #400

City	State	Zip Code
Jackson	MS	39211

Purpose of Disbursement
Polling

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2015

Amount of Each Disbursement this Period

25000.00

Transaction ID : SB17.4144

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

38100.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Starnier Jones for Congress

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36647

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

559.00

Transaction ID : SB17.4160

B. Southwest Airlines

Mailing Address PO Box 36647

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

628.00

Transaction ID : SB17.4161

C. Southwest Airlines

Mailing Address PO Box 36647

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

279.50

Transaction ID : SB17.4162

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1466.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Starner Jones for Congress

Full Name (Last, First, Middle Initial)

A. SurgeRed

Mailing Address 101 N Columbus St Ste 202

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Technology-Telephones

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2015

Amount of Each Disbursement this Period

6060.00

Transaction ID : SB17.4165

Category/
Type**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

--

Category/
Type**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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Category/
Type**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6060.00

83963.39

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 20 OF 20

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4179

Starnier Jones for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2015

Starnier Jones

☐ Primary☐ General☒ Other (specify) ▼

Special-General

Mailing Address

136 North Brooks Street

City

State

ZIP Code

Pontotoc

MS

38863

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

TERMS

Date Incurred

M 03 /

D 20 /

Y 2015 Y

Date Due

M M /

D D /

Y On Demand Y

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

200000.00

TOTALS This Period (last page in this line only)..... ►

200000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.